TREATMENT OF BERI-BERI

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The result of treatment in the following cases appears sufficiently striking to be recorded. Three Lascars were admitted to the Royal Southern Hospital on November 8th, 1911, with symptoms of beri-beri.

HISTORY PRIOR TO ADMISSION

None of the three had had any similar condition before. They had been firemen on a voyage of about five weeks' duration. The food provided them was mainly rice and fish. The rice was of the white, polished variety. The fish had gone bad, and they were unable to eat it. The symptoms had come on about a week previous to admission.

CONDITION ON ADMISSION, TREATMENT AND RESULTS

Case I, Lascar B, age 60. Somewhat emaciated and feeble. Pulse 80, very weak. Scarcely able to walk. Pain and tenderness in the muscles of the arms and legs. Marked oedema of both legs below the knees, and of both hands. Two days after admission, oedema developed in the forearms. Knee jerks, supurator jerks, etc., absent.

Treatment. A full mixed diet, with the addition of yeast (one ounce daily) and Katjangidjo beans (200 grams daily), was commenced on the 14th November. One week later, oedema quite gone, no pain or tenderness in the muscles of the arms or legs, knee jerks present but sluggish, walking well. Discharged sixteen days

after commencement of treatment, walking perfectly, with knee jerks normal, and no pain or oedema.

Case II, E. A., age 20. Patient rather wasted, walked fairly well, but dragged his feet. Knee jerks and other reflexes absent. No oedema. Pain, on pressure, in muscles of calves and arms. Pulse regular, 86.

Treatment. Full diet, and yeast one ounce daily. Six days later, walking better, knee jerks still absent, but no pain in muscles on pressure. Discharged sixteen days after treatment, walking perfectly, knee jerks present, but still sluggish.

Case III, F. A., age 20. Considerably wasted. Pulse 100, temp. 100.7° F. Slight oedema of both legs. Pain in muscles of calf. Walked with a spastic gait. Knee jerks exaggerated. Ankle clonus present.

Treatment. Full diet, with sanatogen and yeast one ounce daily.

Six days afterwards, oedema quite gone. No pain, and walking well. Knee jerks about normal; ankle clonus absent.

Discharged sixteen days after treatment. No pain, no oedema. Increase of body weight. Knee jerks still a little brisk.

Remarks. The improvement in the condition of these patients was much more rapid than is customary, and would seem to show the marked curative power of the addition to the diets of Katjangidjo beans as recommended by Hulshoff Pol, and of yeast as recommended by Schaumann.

The yeast was of the variety used by brewers, and was administered in rice papers, the patients being able to swallow in this fashion about I drachm at a time.